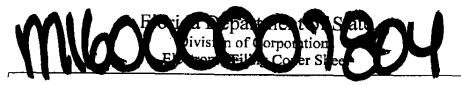
Division of Corporations

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(((H16000241626 3)))



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AHn: Dionne Scott Division of Corporations

: (850)617-6383

From:

Account Name : RENNERT, VOGEL, MANDLER & RODRIGUEZ, P.A,

Account Number: 076103002011 Phone : (305)577-4177 Fax Number : (305)533-1587

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Goldenrod RE, LLC

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FAX AUDIT NO.: H16000241626 3

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. Goldenrod RE, LLC		* * * * * * * * * * * * * * * * * * *	
(Name of For	reign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," or "LLC	2.")
Liability Company," "L.L.C.		sacting business in Florids. The alternate name mu	ist include "Limited
2. Delaware	3	20-2994059	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. September 29, 2016			
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	orida, if prior to registration.) S. to determine penalty liability)	
5. 9200 Dadeland Blvd.,			
Miami, Florida 33156			
	(Street Address of Principal	Office)	
6. 9200 Dadeland Blvd., !	Suite 320		
Miami, Florida 33156			
	(Mailing Address)		
7. Name and street addres	is of Florida registered agent: (P.O. Box	NOT acceptable)	
	Registered Agents of Florida, LLC		
Name:	100 SE 2 Start Suit- 2000		
Office Address:	100 SE 2 Street, Suite 2900		
	Miami	, Florida 33131 (Zip code)	
Danistad	(City)	(Zip code)	
Registered agent's accept Having been named as rej		rocess for the above stated limited liability co	mpany at the place
		registered agent and agree to act in this cap	
	ons of all statutes retailve to the proper a my position ascregistered agont.	ind complete performance of my duties, and . \	i
over the verige and the eye	Changing		≥SE 6
	(Registered agen	it's signature)	52 2
			三 芸芸 写 _
· · · · · · · · · · · · · · · · · · ·	city and address of the person(s) who has	/have authority to manage is/are:	30
MGR	<u> </u>		<u> </u>
Orlando Industrial 3, RE, I	LLC		三次 ヱ ゙
200 Dadeland Blvd., Suit	e 320, Suite 320, Miami, FL 33156	-	95 2
_ _			- 色田 い
		uly authenticated by the official having custod	
irisdiction under the law of f the translator must be su	- /: - /:	is in a foreign language, a translation of the ce	eruncale under oaus
	/h/k		
	Signature of an auth	porized person	
	5	·	
		 Florida Statutes. I am aware that any false if d degree felony as provided for in s.817.155, F 	

Michael Kramer, Authorized Representative

Typed or printed name of signee

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Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GOLDENROD RE, LLC" IS DULY FORMED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND
HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS
OF THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GOLDENROD RE, LLC" WAS FORMED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2016.

FILED FILED

6151378 8300 SR# 20165978203

You may verify this certificate online at corp.dalaware.gov/authver.shtml

AND SOURCE STATE OF S

Authentication: 203072936

Date: 09-28-16

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FAX AUDIT NO.: H160002416263

AFFIDAVII

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Michael Kramer ("Affiant"), as Authorized Representative of Orlando Industrial 3 RE, LLC, a Florida limited liability company, as the sole Member of Goldenrod RE, LLC, a dissolved Florida limited liability company (the "Company") who, after being first duly sworn, deposes and says:

- 1. I am the Authorized Representative of the Company.
- 2. The Company had been voluntarily dissolved on September 22, 2016.
- The Company has no intention of reinstating; therefore, the Company is releasing the name "Goldenred RE, LLC" for use.

FURTHER AFFIANT SAYETH NAUGHT.

Michael Kramer

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this 28 day of September, 2010 by Michael Krumer, as Authorized Representative of Goldenrod RB, LLC, who is personally known for me or who has produced _______ as identification.

My commission expires: 08 0517

Notary Public Tolke Atransfer Print Namo: Les u. S. Hernandie

(407) 338-0163

LESLIE S HERNANDEZ
MY COMMISSION #FF042850
EXPIRES August 5, 2017
FloridaNoter/Service.com

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